

09/27/01

A

ASSISTANT COMMISSIONER FOR PATENTS  
Washington, DC 20231

PATENT  
File No.: 2203.65868  
Date: September 26, 2001

09/26/01

J1050 U.S. PTO  
09/26/01

Transmitted herewith for filing pursuant to 35 U.S.C. §111(a), is the  
patent application of  
Inventor(s): Daffunchio et al.  
For: BIOLOGICAL CONTROL OF HORN FLIES

I hereby certify that this paper is being deposited  
with the United States Postal Service as EXPRESS  
MAIL in an envelope addressed to: Assistant  
Commissioner for Patents, Washington, D.C.  
20231, on September 26, 2001.  
Express Label No.: EL846174910US

Signature: David J. Daffunchio

Enclosed are:

- (X) 27 pages of specification, including 20 claims and an abstract.  
( ) an executed oath or declaration, with power of attorney.  
(X) an unexecuted oath or declaration, with power of attorney.  
( ) \_\_\_ sheet(s) of informal drawing(s).  
( ) \_\_\_ sheet(s) of formal drawings(s).  
( ) Assignment(s) of the invention to \_\_\_\_\_ and Assignment Recordation Form.  
( ) A check in the amount of \$ \_\_\_\_\_ to cover the fee for recording the assignment(s) is enclosed.  
( ) Supplemental Information Disclosure Statement; Form PTO-1449 and cited references.  
( ) Claim for Priority and Priority Document  
( ) PCT Request (Courtesy copy)

Jc821 U.S. PTO  
09/26/01

Fee Calculation For Claims As Filed

a) Basic Fee							\$ 710.00
b) Independent Claims	<u>3</u>	-	3	=	<u>0</u>	x \$ 80.00	= \$ <u>- 0 -</u>
c) Total Claims	<u>20</u>	-	20	=	<u>0</u>	x \$ 18.00	= \$ <u>- 0 -</u>
d) Fee for Multiple Claims						\$270.00	= \$ <u>- 0 -</u>
Total Filing Fee							\$ <u>710.00</u>

- (X) Applicant qualifies for Status as Small Entity, reducing Filing Fee by half to \$ 355.00  
( ) A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.

Preliminary Amendment

- ( ) Please insert the following between the title and line 1 of the specification: "This is a continuation of \_\_\_\_\_".  
(X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

300 South Wacker Drive  
Suite 2500  
Chicago, Illinois 60606  
(312) 360-0080  
Customer Number: 24978

GREER, BURNS & CRAIN, LTD.

By: Lawrence J. Crain  
Lawrence J. Crain  
Registration No. 31,497